State of Rhode Island Office of the Secretary of State		Fee: \$50.00	
Division Of Business Services 148 W. River Street			
Providence RI 02904-2615			
(401) 222-3040			
HOPE	(101) 222 33		
Limited Liability Com	pany		
Annual Report Filing Period: September 1 ·	- November 1		
In accordance with R.I.G.L.	7-16-66(d), each limited liability comp n thirty (30) days after the time presc.		
16-66(b&c)) is subject to a p			
ANNUAL REPORT YEAR:	2020		
1. ID No. <u>000136023</u>			
2. Exact Name of the Limited Liability Company <u>JPENN L.L.C.</u>			
3. State of Formation			
State: <u>RI</u>			
-	Code that best describes the primary information on <u>NAICS</u> can be found	-	e entity. Download
4 Brief Description of the	e Character of the Business Which	is Actually Conducted	in Rhode Island
REAL ESTATE HOLDI	NG COMPANY		
5. Principal Office Addres	55		
No. and Street: 49 MA	ATHEWSON STREET		
		ate: <u>RI</u> Zip: <u>02920</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>ELENA PENNACCHINI</u> Contact Title: <u>PRESIDENT</u>			
	CRANSTON STREET STON Sta	ate: <u>RI</u> Zip: <u>02920</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addres	SS
	First, Middle, Last, Suffix	Address, City or Town, Stat	e, Zip Code, Country
MANAGER	ELENA D PENNACCHINI	49 MATHEWS CRANSTON, RI 0	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

ELENA D. PENNACCHINI 1594 CRANSTON STREET CRANSTON, RI 02920

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 27 Day of October, 2020 at 3:28:42 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By ELENA D PENNACCHINI

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved